

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.  
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND  
CAMPAIGN DISCLOSURE  
2013 OCT 31 PM 4:23

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Frost For Council Person 3rd Ward

IMPORTANT Indicate by # type of committee you are reporting for

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC  
(11) Local Ballot Issue

## CANDIDATE COMMITTEES ONLY:

Candidate Name

William V. Frost

Political Party (if applicable)

Office Sought

City Council 3rd Ward

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

14244

Logged in

TA

Scanned

TA

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

W.V. Frost

SIGNATURE OF PERSON FILING REPORT

319-433-8598

TELEPHONE

31 OCT 13

DATE SIGNED

I AM FILING A 31 Oct 13 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☐☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

## ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL..... \$

## SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)..... \$

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)..... \$

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)..... \$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... \$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

## CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)..... \$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year

**RESET**

SCHEDULE

**F**

(Rev. 02/08)

**LOANS  
RECEIVED  
& REPAY**☐ **CHECK THIS BOX IF  
AMENDING FORM****COMMITTEE NAME** (Must be same as on Statement of Organization)

Frost for Council Person 3rd Ward

**NOTE:** This schedule reports money loaned to the committee which is deposited in the committee account.**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$** \_\_\_\_\_**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
10/15/2013	William Frost 919 Reed St Waterloo, IA 5073		\$ 250.00

**TOTAL (PART I)** \$ 250.00**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

**TOTAL CASH REPAYMENTS (PART II)** \$ \_\_\_\_\_From Schedule E -- **TOTAL LOANS FORGIVEN** \$ \_\_\_\_\_**TOTAL OUTSTANDING LOANS END OF REPORT PERIOD** \$ \_\_\_\_\_

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page \_\_\_\_\_ of \_\_\_\_\_  
(for Schedule F)



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**COMMITTEE NAME** (Must be same as on Statement of Organization)

Frost for Council Person 3rd Ward

Reset Form

SCHEDULE <b>E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/01/13	Lorenzo Creighton 157 Oxon Hill Maryland 20745		signs	\$ 780.00	<input type="checkbox"/>
10/15/13	Richard Felland 835 Rose lane Waterloo, IA 50703		Flyers	20.00	<input type="checkbox"/>
10/15/13	William Frost 919 Reed St Waterloo, IA 50703	self	flyers	60.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$ 860.00	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_\_  
(for Schedule E)